

**At-Store Recycling Program**  
**SHEET B**  
**PLASTIC CARRYOUT BAG/FILM PLASTIC RECYCLING MODEL DATA SHEET**

Section 1—Identification of Operator or Designated Reporting Party Submitting Plastic Carryout Bag/Film Recycling Data Sheet	
1. Name of Operator or Designated Reporting Party:	
2. Mailing Address:	
3. City:	State:                      ZIP Code:
4. Contact Person:	5. Phone Number: (     )
6. E-mail Address: (optional)	
7. Name of Operator(s): (if different from line 1 above, complete lines 8-12 for each Operator)	
8. Mailing Address:	
9. City:	State:                      ZIP Code:
10. Contact Person:	11. Phone Number: (     )
12. Designated Reporting Party's Relationship to Operator: Check all that apply (See Note 1 below)	
<input type="checkbox"/> Recycler/Broker	<input type="checkbox"/> Waste Collector/Hauler <input type="checkbox"/> Distributor/Wholesaler
<input type="checkbox"/> Bag Manufacturer	<input type="checkbox"/> Shipping Company: <input type="checkbox"/> Other: Please specify _____
Section 2—Plastic Carryout Bag/Film Plastic Material Recycled	
13. a. Weight of All Plastic Carryout Bags Recycled During the Reporting Period:	
_____ pounds	<input type="checkbox"/> C/P*
<b>OR (See Note 2 below)</b>	
b. Weight of All Film Plastic Material Recycled During the Reporting Period:	
_____ pounds	<input type="checkbox"/> C/P*
14. Is Weight Data on line 13b. based on use of an Operator-Determined Co-Mingled Recycling Rate? (please check the applicable box)	<input type="checkbox"/> YES
If Yes, submit documentation providing the formula used to calculate the recycling rate.	<input type="checkbox"/> NO

**NOTE 1:** The information for Line 12 is optional

**NOTE 2:** A reporting party may report either the weight of plastic carryout bags recycled or the weight of all film plastic materials recycled. If the weight of all film plastic materials is reported, the CIWMB will calculate the weight of plastic carryout bags recycled by applying either the CIWMB determined co-mingled recycling rate or the Operator-Determined Co-Mingled Recycling Rate. A reporting party with weigh data for both lines 13a and b should call the CIWMB for instructions before submitting this Model Data Sheet.

Attach Additional Copy of this Data Sheet if Necessary

**\* CONFIDENTIAL / PROPRIETARY/TRADE SECRET INFORMATION:** if information provided about a listed company or particular data is considered confidential, proprietary or a Trade Secret, please indicate by placing a check mark in the box marked "C/P" after filling in the appropriate information.

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**Section 3—Plastic Carryout Bag or Film Plastic Recycler Information**

List every Recycler, Broker, Shipping Company or Any Person who Recycled the Collected Plastic Carryout Bags or Film Plastic shown on Line 13 of Section 2.

Company 1: <input type="checkbox"/> C/P*		
15a. Company Name:		
16a. Address:		
17a. City:	State:	ZIP Code:
18a. Contact Person:	19. Phone Number: ( )	
20a. Weight listed on line 13a (Plastic Carryout Bags) <b>OR</b> Weight listed on line 13b (All Film Plastic Material) that was recycled by this company: _____ Pounds		
Company 2: <input type="checkbox"/> C/P*		
15b. Company Name:		
16b. Address:		
17b. City:	State:	ZIP Code:
18b. Contact Person:	19b. Phone Number: ( )	
20b. Weight listed on line 13a (Plastic Carryout Bags) <b>OR</b> Weight listed on line 13b (All Film Plastic Material) that was recycled by this company: _____ Pounds		
Company 3: <input type="checkbox"/> C/P*		
15c. Company Name:		
16c. Address:		
17c. City:	State:	ZIP Code:
18c. Contact Person:	19c. Phone Number: ( )	
20c. Weight listed on line 13a (Plastic Carryout Bags) <b>OR</b> Weight listed on line 13b (All Film Plastic Material) that was recycled by this company: _____ Pounds		

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**Section 4—Addresses of Stores, Distribution Centers, Warehouses or Other Locations Where Plastic Carryout Bags or Film Plastic Recycling Transactions Occurred**

Provide the requested information for each location where the recyclers listed in Section 3 took possession or control of the plastic carryout bags or film plastic material being reported in Section (2)

<b>Location 1:</b> <input type="checkbox"/> C/P*		
21a. Company Name:		
22a. Street Address:		
23a. City:	State:	ZIP Code:
24a. Contact Person:		25a. Phone Number: (     )
<b>Location 2:</b> <input type="checkbox"/> C/P*		
21b. Company Name:		
22b. Street Address:		
23b. City:	State:	ZIP Code:
24b. Contact Person:		25b. Phone Number: (     )
<b>Location 3:</b> <input type="checkbox"/> C/P*		
21c. Company Name:		
22c. Street Address:		
23c. City:	State:	ZIP Code:
24c. Contact Person:		25c. Phone Number: (     )
<b>Location 4:</b> <input type="checkbox"/> C/P*		
21d. Company Name:		
22d. Street Address:		
23d. City:	State:	ZIP Code:
24d. Contact Person:		25d. Phone Number: (     )

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